



General Assembly

January Session, 2007

Raised Bill No. 7163

LCO No. 4220

04220_____PH_

Referred to Committee on Public Health

Introduced by:
(PH)

AN ACT CONCERNING REVISIONS TO DEPARTMENT OF PUBLIC HEALTH STATUTES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 1-43 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2007*):

3 (a) The use of the following form in the creation of a power of attorney
4 is authorized, and, when used, it shall be construed in accordance with
5 the provisions of this chapter:

6 "Notice: The powers granted by this document are broad and
7 sweeping. They are defined in Connecticut Statutory Short Form
8 Power of Attorney Act, sections 1-42 to 1-56, inclusive, of the general
9 statutes, which expressly permits the use of any other or different form
10 of power of attorney desired by the parties concerned. The grantor of
11 any power of attorney or the attorney-in-fact may make application to
12 a court of probate for an accounting as provided in subsection (b) of
13 section 45a-175.

14 Know All Men by These Presents, which are intended to constitute a

15 GENERAL POWER OF ATTORNEY pursuant to Connecticut
16 Statutory Short Form Power of Attorney Act:

17 That I (insert name and address of the principal) do hereby
18 appoint (insert name and address of the agent, or each agent, if
19 more than one is designated) my attorney(s)-in-fact TO ACT

20 If more than one agent is designated and the principal wishes each
21 agent alone to be able to exercise the power conferred, insert in this
22 blank the word 'severally'. Failure to make any insertion or the
23 insertion of the word 'jointly' shall require the agents to act jointly.

24 First: In my name, place and stead in any way which I myself could
25 do, if I were personally present, with respect to the following matters
26 as each of them is defined in the Connecticut Statutory Short Form
27 Power of Attorney Act to the extent that I am permitted by law to act
28 through an agent:

29 (Strike out and initial in the opposite box any one or more of the
30 subdivisions as to which the principal does NOT desire to give the
31 agent authority. Such elimination of any one or more of subdivisions
32 (A) to [(L)] (K), inclusive, shall automatically constitute an elimination
33 also of subdivision [(M)] (L).)

34 To strike out any subdivision the principal must draw a line
35 through the text of that subdivision AND write his initials in the box
36 opposite.

| | | | |
|----|-----|---|-----|
| T1 | (A) | real estate transactions; | () |
| T2 | (B) | chattel and goods transactions; | () |
| T3 | (C) | bond, share and commodity transactions; | () |
| T4 | (D) | banking transactions; | () |
| T5 | (E) | business operating transactions; | () |
| T6 | (F) | insurance transactions; | () |

| | | | |
|-----|-----------|-------------------------------------|------|
| T7 | (G) | estate transactions; | () |
| T8 | (H) | claims and litigation; | () |
| T9 | (I) | personal relationships and affairs; | () |
| T10 | (J) | benefits from military service; | () |
| T11 | (K) | records, reports and statements; | () |
| T12 | [(L) | health care decisions; | ()] |
| T13 | [(M)] (L) | all other matters; | () |
| T14 | ..... |  |  |
| T15 | ..... |  |  |
| T16 | ..... |  |  |
| T17 | ..... |  |  |

37 (Special provisions and limitations may be included in the statutory
38 short form power of attorney only if they conform to the requirements
39 of the Connecticut Statutory Short Form Power of Attorney Act.)

40 Second: With full and unqualified authority to delegate any or all of
41 the foregoing powers to any person or persons whom my attorney(s)-
42 in-fact shall select;

43 Third: Hereby ratifying and confirming all that said attorney(s) or
44 substitute(s) do or cause to be done.

45 In Witness Whereof I have hereunto signed my name and affixed
46 my seal this day of ..., 20...

47 (Signature of Principal) (Seal)
48 (ACKNOWLEDGMENT)"

49 The execution of this statutory short form power of attorney shall be
50 duly acknowledged by the principal in the manner prescribed for the
51 acknowledgment of a conveyance of real property.

52 No provision of this chapter shall be construed to bar the use of any
53 other or different form of power of attorney desired by the parties

54 concerned.

55 Every statutory short form power of attorney shall contain, in
56 boldface type or a reasonable equivalent thereof, the "Notice" at the
57 beginning of this section.

58 (b) A power of attorney is a "statutory short form power of
59 attorney", as this phrase is used in this chapter, when it is in writing,
60 has been duly acknowledged by the principal and contains the exact
61 wording of clause First set forth in subsection (a) of this section, except
62 that any one or more of subdivisions (A) to [(M)] (K) may be stricken
63 out and initialed by the principal, in which case the subdivisions so
64 stricken out and initialed and also subdivision [(M)] (L) shall be
65 deemed eliminated. A statutory short form power of attorney may
66 contain modifications or additions of the types described in section 1-
67 56.

68 (c) If more than one agent is designated by the principal, such
69 agents, in the exercise of the powers conferred, shall act jointly unless
70 the principal specifically provides in such statutory short form power
71 of attorney that they are to act severally.

72 (d) (1) The principal may indicate that a power of attorney duly
73 acknowledged in accordance with this section shall take effect upon
74 the occurrence of a specified contingency, including a date certain or
75 the occurrence of an event, provided that an agent designated by the
76 principal executes a written affidavit in accordance with section 1-56h
77 that such contingency has occurred.

78 (2) The principal may indicate the circumstance or date certain upon
79 which the power of attorney shall cease to be effective.

80 Sec. 2. Section 1-55 of the general statutes is repealed and the
81 following is substituted in lieu thereof (*Effective October 1, 2007*):

82 In a statutory short form power of attorney, the language conferring
83 general authority with respect to all other matters shall be construed to

84 mean that the principal authorizes the agent to act as an alter ego of
85 the principal with respect to any matters and affairs not enumerated in
86 sections 1-44 to 1-54, inclusive, except health care decisions, and which
87 the principal can do through an agent.

88 Sec. 3. Subsection (g) of section 17a-238 of the general statutes is
89 repealed and the following is substituted in lieu thereof (*Effective*
90 *October 1, 2007*):

91 (g) The commissioner's oversight and monitoring of the medical
92 care of persons placed or treated under the direction of the
93 commissioner does not include the authority to make treatment
94 decisions, except in limited circumstances in accordance with statutory
95 procedures. In the exercise of such oversight and monitoring
96 responsibilities, the commissioner shall not impede or seek to impede a
97 properly executed medical order to withhold cardiopulmonary
98 resuscitation. For purposes of this subsection, "properly executed
99 medical order to withhold cardiopulmonary resuscitation" means (1) a
100 written order by the attending physician; (2) in consultation and with
101 the consent of the patient or a person authorized by law; (3) when the
102 attending physician is of the opinion that the patient is in a terminal
103 condition, as defined in section 19a-570, which condition will result in
104 death within days or weeks; and (4) when such physician has
105 requested and obtained a second opinion from a Connecticut licensed
106 physician in the appropriate specialty that confirms the patient's
107 terminal condition; and includes the entry of such an order when the
108 attending physician is of the opinion that the patient is in the final
109 stage of a terminal condition but cannot state that the patient may be
110 expected to expire during the next several days or weeks, or, in
111 consultation with a physician qualified to make a neurological
112 diagnosis, deems the patient to be permanently unconscious, provided
113 the commissioner has reviewed the decision with the department's
114 director of community medical services, the family and guardian of the
115 patient and others [who] whom the commissioner deems appropriate,
116 and determines that the order is a medically acceptable decision.

117 Sec. 4. Subsection (a) of section 19a-7d of the general statutes is
118 repealed and the following is substituted in lieu thereof (*Effective*
119 *October 1, 2007*):

120 (a) The Commissioner of Public Health may establish, within
121 available appropriations, a program to provide three-year grants to
122 community-based providers of primary care services in order to
123 expand access to health care for the uninsured. The grants may be
124 awarded to community-based providers of primary care for (1)
125 funding for direct services, (2) recruitment and retention of primary
126 care clinicians and registered nurses through subsidizing of salaries or
127 through a loan repayment program, and (3) capital expenditures. The
128 community-based providers of primary care under the direct service
129 program shall provide, or arrange access to, primary and preventive
130 services, referrals to specialty services, including rehabilitative and
131 mental health services, inpatient care, prescription drugs, basic
132 diagnostic laboratory services, health education and outreach to alert
133 people to the availability of services. Primary care clinicians and
134 registered nurses participating in the state loan repayment program or
135 receiving subsidies shall provide services to the uninsured based on a
136 sliding fee schedule, provide free care if necessary, accept Medicare
137 assignment and participate as [a] Medicaid [provider] providers, or
138 provide nursing services in school-based health centers. The
139 commissioner may adopt regulations, in accordance with the
140 provisions of chapter 54, to establish eligibility criteria, services to be
141 provided by participants, the sliding fee schedule, reporting
142 requirements and the loan repayment program. For the purposes of
143 this section, "primary care clinicians" includes family practice
144 physicians, general practice osteopaths, obstetricians and
145 gynecologists, internal medicine physicians, pediatricians, dentists,
146 certified nurse midwives, advanced practice registered nurses,
147 physician assistants and dental hygienists.

148 Sec. 5. Subsection (a) of section 19a-17 of the general statutes is
149 repealed and the following is substituted in lieu thereof (*Effective*

150 *October 1, 2007*):

151 (a) Each board or commission established under chapters 369 to 376,
152 inclusive, 378 to 381, inclusive, and 383 to 388, inclusive, and the
153 Department of Public Health with respect to professions under its
154 jurisdiction which have no board or commission may take any of the
155 following actions, singly or in combination, based on conduct which
156 occurred prior or subsequent to the issuance of a permit or a license
157 upon finding the existence of good cause:

158 (1) Revoke a practitioner's license or permit;

159 (2) Suspend a practitioner's license or permit;

160 (3) Censure a practitioner or permittee;

161 (4) Issue a letter of reprimand to a practitioner or permittee;

162 (5) Place a practitioner or permittee on probationary status and
163 require the practitioner or permittee to:

164 (A) Report regularly to such board, commission or department
165 upon the matters which are the basis of probation;

166 (B) Limit practice to those areas prescribed by such board,
167 commission or department;

168 (C) Continue or renew professional education until a satisfactory
169 degree of skill has been attained in those areas which are the basis for
170 the probation;

171 (6) Assess a civil penalty of up to [ten] twenty-five thousand dollars;
172 or

173 (7) Summarily take any action specified in this subsection against a
174 practitioner's license or permit upon receipt of proof that such
175 practitioner has been:

176 (A) Found guilty or convicted as a result of an act which constitutes
177 a felony under (i) the laws of this state, (ii) federal law or (iii) the laws
178 of another jurisdiction and which, if committed within this state,
179 would have constituted a felony under the laws of this state; or

180 (B) Subject to disciplinary action similar to that specified in this
181 subsection by a duly authorized professional agency of any state, the
182 District of Columbia, a United States possession or territory or a
183 foreign jurisdiction. The applicable board or commission, or the
184 department shall promptly notify the practitioner or permittee that his
185 license or permit has been summarily acted upon pursuant to this
186 subsection and shall institute formal proceedings for revocation within
187 ninety days after such notification.

188 Sec. 6. Section 19a-26 of the general statutes is repealed and the
189 following is substituted in lieu thereof (*Effective October 1, 2007*):

190 The Department of Public Health may establish, maintain and
191 control state laboratories to perform examinations of supposed morbid
192 tissues, other laboratory tests for the diagnosis and control of
193 preventable diseases, and laboratory work in the field of sanitation,
194 environmental and occupational testing and research studies for the
195 protection and preservation of the public health. Such laboratory
196 services shall be performed upon the application of licensed
197 physicians, other laboratories, licensed dentists, licensed podiatrists,
198 local directors of health, public utilities or state departments or
199 institutions, subject to regulations prescribed by the Commissioner of
200 Public Health, and upon payment of any applicable fee as [hereinafter]
201 provided in this section. For such purposes the department may
202 provide necessary buildings and apparatus, employ, subject to the
203 provisions of chapter 67, administrative and scientific personnel and
204 assistants and do all things necessary for the conduct of such
205 laboratories. The Commissioner of Public Health [shall] may establish
206 a schedule of fees, [based upon nationally recognized standards and
207 performance measures for analytic work effort for such laboratory

208 services,] provided the commissioner [(1) shall waive] waives the fees
209 for local directors of health and local law enforcement agencies. [and
210 (2)] If the commissioner establishes a schedule of fees, the
211 commissioner may waive (1) the fees, in full or in part, for others if the
212 commissioner determines that the public health requires a waiver,].
213 The commissioner may waive] and (2) fees for chlamydia and
214 gonorrhea testing for nonprofit organizations if the organization
215 provides combination chlamydia and gonorrhea test kits. The
216 commissioner shall also establish a fair handling fee which a client of a
217 state laboratory may charge a person or third party payer for
218 arranging for the services of the laboratory. Such client shall not charge
219 an amount in excess of such handling fee.

220 Sec. 7. Section 19a-121 of the general statutes is repealed and the
221 following is substituted in lieu thereof (*Effective October 1, 2007*):

222 (a) The Department of Public Health shall establish a grant program
223 to provide funds to [private agencies which provide services to
224 persons suffering from] qualifying individuals and organizations,
225 including local health departments, that serve persons infected with
226 and affected by human immunodeficiency virus ("HIV") or acquired
227 immune deficiency syndrome ("AIDS"), [and] the families of such
228 persons and persons at risk of contracting HIV or AIDS, or both. The
229 grants shall be used for services including, but not limited to,
230 education, counseling and prevention.

231 (b) Any agency [which] that receives funds from the department to
232 provide tests for [AIDS] HIV shall give priority to persons in high risk
233 categories. [and shall establish a fee schedule based upon a person's
234 ability to pay for such test.]

235 Sec. 8. Section 19a-121b of the general statutes is repealed and the
236 following is substituted in lieu thereof (*Effective October 1, 2007*):

237 The Commissioner of Public Health shall adopt regulations in
238 accordance with the provisions of chapter 54 to implement the

239 provisions of [sections] section 19a-121, [and 19a-121a.]

240 Sec. 9. Section 19a-121c of the general statutes is repealed and the
241 following is substituted in lieu thereof (*Effective October 1, 2007*):

242 The Department of Public Health shall establish a public
243 information program for the distribution of materials, including but
244 not limited to, pamphlets, films and public service announcements, on
245 HIV and AIDS.

246 Sec. 10. Section 19a-121f of the general statutes is repealed and the
247 following is substituted in lieu thereof (*Effective October 1, 2007*):

248 [(a) Any municipality, hospital, public or independent college or
249 university or individual] Any qualifying individual or organization
250 may apply to the Commissioner of Public Health for a grant-in-aid for
251 a program established for the study or treatment of [acquired immune
252 deficiency syndrome. Such grant shall be used (1) to conduct a study of
253 (A) the effectiveness of procedures available for the prevention of
254 AIDS, (B) testing procedures for the detection of the human
255 immunodeficiency virus, (C) the means by which the transmission of
256 AIDS from person to person can be effectively prevented, or (D) how
257 the disease progresses in the victim, (2) for purposes of providing
258 counseling or psychiatric assistance for persons infected by the human
259 immunodeficiency virus and their families, and (3) the future state
260 resources which will be necessary to address the AIDS epidemic in
261 Connecticut] HIV or AIDS, or both. Any request for such grant shall be
262 submitted in writing to the commissioner, in the form and manner
263 prescribed by the commissioner.

264 [(b) The Commissioner of Public Health shall adopt regulations, and
265 may adopt emergency regulations, in accordance with the provisions
266 of chapter 54, which establish all necessary guidelines and procedures
267 for the administration of such grant program.]

268 Sec. 11. Subsection (i) of section 19a-180 of the general statutes is

269 repealed and the following is substituted in lieu thereof (*Effective*
270 *October 1, 2007*):

271 (i) The commissioner shall develop a short form application for
272 primary service area responders seeking to add an emergency vehicle
273 to [its] their existing [fleet] fleets pursuant to subsection (h) of this
274 section. The application shall require [the] an applicant to provide such
275 information as the commissioner deems necessary, including, but not
276 limited to, (1) the applicant's name and address, (2) the primary service
277 area where the additional vehicle is proposed to be used, (3) an
278 explanation as to why the additional vehicle is necessary and its
279 proposed use, (4) proof of insurance, (5) a list of the providers to
280 whom notice was sent pursuant to subsection (h) of this section and
281 proof of such notification, and (6) total call volume, response time and
282 calls passed within the primary service area for the one year period
283 preceding the date of the application.

284 Sec. 12. Section 19a-322 of the general statutes is repealed and the
285 following is substituted in lieu thereof (*Effective October 1, 2007*):

286 The managers of each crematory shall keep books of record, which
287 shall be open at reasonable times for inspection, in which shall be
288 entered the name, age, sex and residence of each person whose body is
289 cremated, together with the authority for such cremation and the
290 disposition of the ashes. The owner or superintendent shall complete
291 the cremation permit required by section 19a-323, retain a copy for
292 record and immediately forward the original permit to the registrar of
293 the town in which the death occurred. The registrar shall keep the
294 cremation permit on file and record it with other vital statistics. When
295 any body is removed from this state for the purpose of cremation, the
296 person having the legal custody and control of such body shall cause a
297 certificate to be procured from the person in charge of the crematory in
298 which such body is incinerated, stating the facts called for in this
299 section, and cause such certificate to be filed for record with the
300 registrar of the town in which the death occurred. Each crematory shall

301 retain on its premises, for not less than three years after final
302 disposition of cremated remains, books of record, copies of cremation
303 permits, cremation authorization documentation and documentation
304 of receipt of cremated remains.

305 Sec. 13. Subsection (a) of section 19a-490 of the general statutes is
306 repealed and the following is substituted in lieu thereof (*Effective*
307 *October 1, 2007*):

308 As used in this chapter and sections 17b-261e, 38a-498b and 38a-
309 525b:

310 (a) "Institution" means a hospital, residential care home, health care
311 facility for the handicapped, nursing home, rest home, home health
312 care agency, homemaker-home health aide agency, mental health
313 facility, assisted living services agency, substance abuse treatment
314 facility, outpatient surgical facility, an infirmary operated by an
315 educational institution for the care of students enrolled in, and faculty
316 and employees of, such institution; a facility engaged in providing
317 services for the prevention, diagnosis, treatment or care of human
318 health conditions, including facilities operated and maintained by any
319 state agency, except facilities for the care or treatment of mentally ill
320 persons or persons with substance abuse problems; and a residential
321 facility for the mentally retarded licensed pursuant to section 17a-227
322 and certified to participate in the Title XIX Medicaid program as an
323 intermediate care facility for the mentally retarded.

324 Sec. 14. Subsection (l) of section 19a-490 of the general statutes is
325 repealed and the following is substituted in lieu thereof (*Effective*
326 *October 1, 2007*):

327 (l) "Assisted living services agency" means an [institution] agency
328 that provides, among other things, nursing services and assistance
329 with activities of daily living to a population that is chronic and stable.

330 Sec. 15. Subdivision (3) of subsection (c) of section 19a-561 of the

331 general statutes is repealed and the following is substituted in lieu
332 thereof (*Effective October 1, 2007*):

333 (3) An affidavit signed by the applicant disclosing any matter in
334 which the applicant (1) has been convicted of an offense classified as a
335 felony under section 53a-25 or pleaded nolo contendere to a felony
336 charge, or (2) has been held liable or enjoined in a civil action by final
337 judgment, if the felony or civil action involved fraud, embezzlement,
338 fraudulent conversion or misappropriation of property, [;] or (3) is
339 subject to a currently effective injunction or restrictive or remedial
340 order of a court of record at the time of application, or (4) within the
341 past five years has had any state or federal license or permit
342 suspended or revoked as a result of an action brought by a
343 governmental agency or department, arising out of or relating to
344 business activity or health care, including, but not limited to, actions
345 affecting the operation of a nursing facility, residential care home or
346 any facility subject to sections 17b-520 to 17b-535, inclusive, or a
347 similar statute in another state or country.

348 Sec. 16. Subsection (a) of section 19a-562 of the general statutes is
349 repealed and the following is substituted in lieu thereof (*Effective*
350 *October 1, 2007*):

351 (a) As used in this section and section 19a-562a, as amended by this
352 act, "Alzheimer's special care unit or program" means any nursing
353 facility, residential care home, assisted living facility, adult congregate
354 living facility, adult day care center, hospice or adult foster home that
355 locks, secures, segregates or provides a special program or unit for
356 residents with a diagnosis of probable Alzheimer's disease, dementia
357 or other similar disorder, in order to prevent or limit access by a
358 resident outside the designated or separated area, and that advertises
359 or markets the facility as providing specialized care or services for
360 persons suffering from Alzheimer's disease or dementia.

361 Sec. 17. Subsection (c) of section 19a-562 of the general statutes is
362 repealed and the following is substituted in lieu thereof (*Effective*

363 *October 1, 2007*):

364 (c) Each Alzheimer's special care unit or program shall develop a
365 standard disclosure form for compliance with subsection (b) of this
366 section and shall annually review and verify the accuracy of the
367 information provided by Alzheimer's special care units or programs.
368 Each Alzheimer's special care unit or program shall update any
369 significant [changes] change to the information reported pursuant to
370 subsection (b) of this section not later than thirty days after such
371 change.

372 Sec. 18. Section 19a-562a of the general statutes is repealed and the
373 following is substituted in lieu thereof (*Effective October 1, 2007*):

374 Each Alzheimer's special care unit or program shall annually
375 provide Alzheimer's and dementia specific training to all licensed and
376 registered direct care staff who provide direct patient care to residents
377 enrolled in Alzheimer's special care units or programs. Such
378 requirements shall include, but not be limited to, (1) not less than eight
379 hours of dementia-specific training, which shall be completed not later
380 than six months after the date of employment and not less than three
381 hours of such training annually thereafter, and (2) annual training of
382 not less than two hours in pain recognition and administration of pain
383 management techniques for direct care staff.

384 Sec. 19. Section 19a-570 of the general statutes is repealed and the
385 following is substituted in lieu thereof (*Effective October 1, 2007*):

386 For purposes of this section [,] and sections 19a-571 to 19a-580c,
387 inclusive:

388 (1) "Advance health care directive" or "advance directive" means a
389 writing executed in accordance with the provisions of this chapter,
390 including, but not limited to, a living will, or an appointment of health
391 care representative, or both;

392 (2) "Appointment of health care representative" means a document

393 executed in accordance with section 19a-575a, as amended by this act,
394 or 19a-577 that appoints a health care representative to make health
395 care decisions for the declarant in the event the declarant becomes
396 incapacitated;

397 (3) "Attending physician" means the physician selected by, or
398 assigned to, the patient, who has primary responsibility for the
399 treatment and care of the patient;

400 (4) "Beneficial medical treatment" includes the use of medically
401 appropriate treatment, including surgery, treatment, medication and
402 the utilization of artificial technology to sustain life;

403 (5) "Health care representative" means the individual appointed by
404 a declarant pursuant to an appointment of health care representative
405 for the purpose of making health care decisions on behalf of the
406 declarant;

407 (6) "Incapacitated" means being unable to understand and
408 appreciate the nature and consequences of health care decisions,
409 including the benefits and disadvantages of such treatment, and to
410 reach and communicate an informed decision regarding the treatment;

411 (7) "Life support system" means any medical procedure or
412 intervention which, when applied to an individual, would serve only
413 to postpone the moment of death or maintain the individual in a state
414 of permanent unconsciousness, including, but not limited to,
415 mechanical or electronic devices, including artificial means of
416 providing nutrition or hydration;

417 (8) "Living will" means a written statement in compliance with
418 section 19a-575a, as amended by this act, containing a declarant's
419 wishes concerning any aspect of his or her health care, including the
420 withholding or withdrawal of life support systems;

421 (9) "Next of kin" means any member of the following classes of
422 persons, in the order of priority listed: (A) The spouse of the patient;

423 (B) an adult son or daughter of the patient; (C) either parent of the
424 patient; (D) an adult brother or sister of the patient; and (E) a
425 grandparent of the patient;

426 (10) "Permanently unconscious" means an irreversible condition in
427 which the individual is at no time aware of himself or herself or the
428 environment and shows no behavioral response to the environment
429 and includes permanent coma and persistent vegetative state;

430 (11) "Terminal condition" means the final stage of an incurable or
431 irreversible medical condition which, without the administration of a
432 life support system, will result in death within a relatively short time
433 period, [time,] in the opinion of the attending physician.

434 Sec. 20. Section 19a-575a of the general statutes is repealed and the
435 following is substituted in lieu thereof (*Effective October 1, 2007*):

436 (a) Any person eighteen years of age or older may execute a
437 document that contains health care instructions, the appointment of a
438 health care representative, the designation of a conservator of the
439 person for future incapacity and a document of anatomical gift. Any
440 such document shall be signed and dated by the maker with at least
441 two witnesses and may be in the substantially following form:

442 THESE ARE MY HEALTH CARE INSTRUCTIONS.

443 MY APPOINTMENT OF A HEALTH CARE REPRESENTATIVE,

444 THE DESIGNATION OF MY CONSERVATOR OF THE PERSON

445 FOR MY FUTURE INCAPACITY

446 AND

447 MY DOCUMENT OF ANATOMICAL GIFT

448 To any physician who is treating me: These are my health care
449 instructions including those concerning the withholding or withdrawal

450 of life support systems, together with the appointment of my health
451 care representative, the designation of my conservator of the person
452 for future incapacity and my document of anatomical gift. As my
453 physician, you may rely on these health care instructions and any
454 decision made by my health care representative or conservator of my
455 person, if I am incapacitated to the point when I can no longer actively
456 take part in decisions for my own life, and am unable to direct my
457 physician as to my own medical care.

458 I, ..., the author of this document, request that, if my condition is
459 deemed terminal or if I am determined to be permanently
460 unconscious, I be allowed to die and not be kept alive through life
461 support systems. By terminal condition, I mean that I have an
462 incurable or irreversible medical condition which, without the
463 administration of life support systems, will, in the opinion of my
464 attending physician, result in death within a relatively short time. By
465 permanently unconscious I mean that I am in a permanent coma or
466 persistent vegetative state which is an irreversible condition in which I
467 am at no time aware of myself or the environment and show no
468 behavioral response to the environment. The life support systems
469 which I do not want include, but are not limited to: Artificial
470 respiration, cardiopulmonary resuscitation and artificial means of
471 providing nutrition and hydration. I do want sufficient pain
472 medication to maintain my physical comfort. I do not intend any direct
473 taking of my life, but only that my dying not be unreasonably
474 prolonged.

475 I appoint to be my health care representative. If my attending
476 physician determines that I am unable to understand and appreciate
477 the nature and consequences of health care decisions and unable to
478 reach and communicate an informed decision regarding treatment, my
479 health care representative is authorized to make any and all health care
480 decisions for me, including (1) the decision to accept or refuse any
481 treatment, service or procedure used to diagnose or treat my physical
482 or mental condition, except as otherwise provided by law [, including,

483 but not limited to,] such as for psychosurgery or shock therapy, and (2)
484 the decision to provide, withhold or withdraw life support systems. I
485 direct my health care representative to make decisions on my behalf in
486 accordance with my wishes, as stated in this document or as otherwise
487 known to my health care representative. In the event my wishes are
488 not clear or a situation arises that I did not anticipate, my health care
489 representative may make a decision in my best interests, based upon
490 what is known of my wishes.

491 If is unwilling or unable to serve as my health care
492 representative, I appoint to be my alternative health care
493 representative.

494 If a conservator of my person should need to be appointed, I
495 designate be appointed my conservator. If is unwilling or unable
496 to serve as my conservator, I designate No bond shall be required
497 of either of them in any jurisdiction.

498 I hereby make this anatomical gift, if medically acceptable, to take
499 effect upon my death.

500 I give: (check one)

T18 (1) any needed organs or parts

T19 (2) only the following organs or parts

501 to be donated for: (check one)

T20 (1) any of the purposes stated in subsection (a) of

T21 section 19a-279f of the general statutes

T22 (2) these limited purposes

502 These requests, appointments, and designations are made after

503 careful reflection, while I am of sound mind. Any party receiving a
504 duly executed copy or facsimile of this document may rely upon it
505 unless such party has received actual notice of my revocation of it.

T23 Date, 20..

T24 L.S.

506 This document was signed in our presence by the author of this
507 document, who appeared to be eighteen years of age or older, of sound
508 mind and able to understand the nature and consequences of health
509 care decisions at the time this document was signed. The author
510 appeared to be under no improper influence. We have subscribed this
511 document in the author's presence and at the author's request and in
512 the presence of each other.

| | | |
|-----|----------------------------|----------------------------|
| T25 | .... | .... |
| T26 | (Witness) | (Witness) |
| T27 | .... | .... |
| T28 | (Number and Street) | (Number and Street) |
| T29 | .... | .... |
| T30 | (City, State and Zip Code) | (City, State and Zip Code) |

| | | |
|-----|----------------------|------------|
| T31 | STATE OF CONNECTICUT | } ss. |
| T32 | | |
| T33 | COUNTY OF | |

513 We, the subscribing witnesses, being duly sworn, say that we
514 witnessed the execution of these health care instructions, the
515 appointments of a health care representative, the designation of a
516 conservator for future incapacity and a document of anatomical gift by

517 the author of this document; that the author subscribed, published and
518 declared the same to be the author's instructions, appointments and
519 designation in our presence; that we thereafter subscribed the
520 document as witnesses in the author's presence, at the author's request,
521 and in the presence of each other; that at the time of the execution of
522 said document the author appeared to us to be eighteen years of age or
523 older, of sound mind, able to understand the nature and consequences
524 of said document, and under no improper influence, and we make this
525 affidavit at the author's request this day of 20...

T34
T35 (Witness) (Witness)
526 Subscribed and sworn to before me this day of 20..

T36
T37 Commissioner of the Superior Court
T38 Notary Public
T39 My commission expires:

527 (Print or type name of all persons signing under all signatures)

528 (b) Except as provided in section 19a-579b, an appointment of health
529 care representative may only be revoked by the declarant, in writing,
530 and the writing shall be signed by the declarant and two witnesses.

531 (c) The attending physician or other health care provider shall make
532 the revocation of an appointment of health care representative a part of
533 the declarant's medical record.

534 (d) In the absence of knowledge of the revocation of an appointment
535 of health care representative, a person who carries out an advance
536 directive pursuant to the provisions of this chapter shall not be subject

537 to civil or criminal liability or discipline for unprofessional conduct for
538 carrying out such advance directive.

539 (e) The revocation of an appointment of health care representative
540 does not, of itself, revoke the living will of the declarant.

541 Sec. 21. Section 19a-577 of the general statutes is repealed and the
542 following is substituted in lieu thereof (*Effective October 1, 2007*):

543 Any person eighteen years of age or older may execute a document
544 that may, but need not be, in substantially the following form:

545 DOCUMENT CONCERNING THE APPOINTMENT
546 OF HEALTH CARE REPRESENTATIVE

547 "I understand that, as a competent adult, I have the right to make
548 decisions about my health care. There may come a time when I am
549 unable, due to incapacity, to make my own health care decisions. In
550 these circumstances, those caring for me will need direction and will
551 turn to someone who knows my values and health care wishes. By
552 signing this appointment of health care representative, I appoint a
553 health care representative with legal authority to make health care
554 decisions on my behalf in such case or at such time.

555 I appoint (Name) to be my health care representative. If my
556 attending physician determines that I am unable to understand and
557 appreciate the nature and consequences of health care decisions and to
558 reach and communicate an informed decision regarding treatment, my
559 health care representative is authorized to (1) accept or refuse any
560 treatment, service or procedure used to diagnose or treat my physical
561 or mental condition, except as otherwise provided by law, [including,
562 but not limited to,] such as for psychosurgery or shock therapy, and (2)
563 make the decision to provide, withhold or withdraw life support
564 systems. I direct my health care representative to make decisions on
565 my behalf in accordance with my wishes as stated in a living will, or as

566 otherwise known to my health care representative. In the event my
567 wishes are not clear or a situation arises that I did not anticipate, my
568 health care representative may make a decision in my best interests,
569 based upon what is known of my wishes.

570 If this person is unwilling or unable to serve as my health care
571 representative, I appoint (Name) to be my alternative health care
572 representative."

573 "This request is made, after careful reflection, while I am of sound
574 mind."

575 (Signature)
576 (Date)

577 This document was signed in our presence, by the above-named
578 (Name) who appeared to be eighteen years of age or older, of sound
579 mind and able to understand the nature and consequences of health
580 care decisions at the time the document was signed.

581 (Witness)
582 (Address)
583 (Witness)
584 (Address)

585 Sec. 22. Section 19a-580f of the general statutes is repealed and the
586 following is substituted in lieu thereof (*Effective October 1, 2007*):

587 (a) An advance directive properly executed prior to October 1, 2006,
588 shall have the same legal force and effect as if it had been executed in
589 accordance with the provisions of this chapter.

590 (b) An appointment of health care agent properly executed prior to
591 October 1, 2006, shall have the same legal force and effect as if it had
592 been executed in accordance with the provisions of this chapter in

593 effect at the time of its execution.

594 (c) A power of attorney for health care decisions properly executed
595 prior to October 1, 2006, shall have the same power and effect as
596 provided under section 1-55 of the general statutes in effect at the time
597 of its execution.

598 Sec. 23. Subsection (c) of section 20-8a of the general statutes is
599 repealed and the following is substituted in lieu thereof (*Effective*
600 *October 1, 2007*):

601 (c) The Commissioner of Public Health shall establish a list of
602 twenty-four persons who may serve as members of medical hearing
603 panels established pursuant to subsection (g) of this section. Persons
604 appointed to the list shall serve as members of the medical hearing
605 panels and provide the same services as members of the Connecticut
606 Medical Examining Board. Members from the list serving on such
607 panels shall not be voting members of the Connecticut Medical
608 Examining Board. The list shall consist of twenty-four members
609 appointed by the commissioner, at least eight of whom shall be
610 physicians, as defined in section 20-13a, with at least one of such
611 physicians being a graduate of a medical education program
612 accredited by the American Osteopathic Association, at least one of
613 whom shall be a physician assistant licensed pursuant to section 20-
614 12b, and nine of whom shall be members of the public. No professional
615 member of the list shall be an elected or appointed officer of a
616 professional society or association relating to such member's
617 profession at the time of appointment to the list or have been such an
618 officer during the year immediately preceding such appointment to the
619 list. A licensed professional appointed to the list shall be a practitioner
620 in good professional standing and a resident of this state. All vacancies
621 shall be filled by the commissioner. Successors and [appointments]
622 members appointed to fill a vacancy on the list shall possess the same
623 qualifications as those required of the member succeeded or replaced.
624 No person whose spouse, parent, brother, sister, child or spouse of a

625 child is a physician, as defined in section 20-13a, or a physician
626 assistant, as defined in section 20-12a, shall be appointed to the list as a
627 member of the public. Each person appointed to the list shall serve
628 without compensation at the pleasure of the commissioner. Each
629 medical hearing panel shall consist of three members, one of whom
630 shall be a member of the Connecticut Medical Examining Board, one of
631 whom shall be a physician or physician assistant, as appropriate, and
632 one of whom shall be a public member. The physician and public
633 member may be a member of the board or a member from the list
634 established pursuant to this subsection.

635 Sec. 24. Subdivision (7) of section 20-12a of the general statutes is
636 repealed and the following is substituted in lieu thereof (*Effective from*
637 *passage*):

638 (7) (A) "Supervision" in hospital settings means the exercise by the
639 supervising physician of oversight, control and direction of the
640 services of a physician assistant. Supervision includes but is not
641 limited to: (i) Continuous availability of direct communication either in
642 person or by radio, telephone or telecommunications between the
643 physician assistant and the supervising physician; (ii) active and
644 continuing overview of the physician assistant's activities to ensure
645 that the supervising physician's directions are being implemented and
646 to support the physician assistant in the performance of his or her
647 services; (iii) personal review by the supervising physician of the
648 physician assistant's practice at least weekly or more frequently as
649 necessary to ensure quality patient care; (iv) review of the charts and
650 records of the physician assistant on a regular basis as necessary to
651 ensure quality patient care; (v) delineation of a predetermined plan for
652 emergency situations; and (vi) designation of an alternate licensed
653 physician [registered with the department pursuant to section 20-12c]
654 in the absence of the supervising physician.

655 (B) "Supervision" in settings other than hospital settings means the
656 exercise by the supervising physician of oversight, control and

657 direction of the services of a physician assistant. Supervision includes,
658 but is not limited to: (i) Continuous availability of direct
659 communication either in person or by radio, telephone or
660 telecommunications between the physician assistant and the
661 supervising physician; (ii) active and continuing overview of the
662 physician assistant's activities to ensure that the supervising
663 physician's directions are being implemented and to support the
664 physician assistant in the performance of his or her services; (iii)
665 personal review by the supervising physician of the physician
666 assistant's services through a face-to-face meeting with the physician
667 assistant, at least weekly or more frequently as necessary to ensure
668 quality patient care, at a facility or practice location where the
669 physician assistant or supervising physician performs services; (iv)
670 review of the charts and records of the physician assistant on a regular
671 basis as necessary to ensure quality patient care and written
672 documentation by the supervising physician of such review at the
673 facility or practice location where the physician assistant or
674 supervising physician performs services; (v) delineation of a
675 predetermined plan for emergency situations; and (vi) designation of
676 an alternate licensed physician [registered with the department
677 pursuant to section 20-12c] in the absence of the supervising physician.

678 Sec. 25. Subdivision (7) of subsection (a) of section 20-74s of the
679 general statutes is repealed and the following is substituted in lieu
680 thereof (*Effective from passage*):

681 (7) "Supervision" means the regular on-site observation of the
682 functions and activities of an alcohol and drug counselor in the
683 performance of his or her duties and responsibilities to include a
684 review of the records, reports, treatment plans or recommendations
685 [developed by a licensed alcohol and drug counselor] with respect to
686 an individual or group.

687 Sec. 26. Subsection (t) of section 20-74s of the general statutes is
688 repealed and the following is substituted in lieu thereof (*Effective from*

689 *passage*):

690 (t) Nothing in this section shall be construed to apply to the
 691 activities and services of a person licensed [or certified] in this state to
 692 practice medicine and surgery, psychology, marital and family
 693 therapy, clinical social work, [chiropractic, acupuncture, physical
 694 therapy, occupational therapy, nursing or any other profession
 695 licensed or certified by the state, when] professional counseling,
 696 advanced practice registered nursing or registered nursing, when such
 697 person is acting within the scope of the person's [profession or
 698 occupation] license and doing work of a nature consistent with [a] that
 699 person's [training] license, provided the person does not hold himself
 700 or herself out to the public as possessing a license or certification
 701 issued pursuant to this section.

702 Sec. 27. Subsection (a) of section 20-54 of the general statutes is
 703 repealed and the following is substituted in lieu thereof (*Effective*
 704 *October 1, 2007*):

705 (a) No person other than those described in section 20-57 and those
 706 to whom a license has been reissued as provided by section 20-59 shall
 707 engage in the practice of podiatry in this state until such person has
 708 presented to the department satisfactory evidence that such person
 709 [has had a high school education or its equivalent,] has received a
 710 diploma or other certificate of graduation from an accredited school or
 711 college of chiropody or podiatry approved by the Board of Examiners
 712 in Podiatry with the consent of the Commissioner of Public Health, nor
 713 shall any person so practice until such person has obtained a license
 714 from the Department of Public Health after meeting the requirements
 715 of this chapter. A graduate of an approved school of chiropody or
 716 podiatry subsequent to July 1, 1947, shall present satisfactory evidence
 717 that he or she has been a resident student through not less than four
 718 graded courses of not less than thirty-two weeks each in such
 719 approved school and has received the degree of D.S.C., Doctor of
 720 Surgical Chiropody, or Pod. D., Doctor of Podiatry, or other equivalent

721 degree; and, if a graduate of an approved chiropody or podiatry school
 722 subsequent to July 1, 1951, that he or she has completed, before
 723 beginning the study of podiatry, a course of study of an academic year
 724 of not less than thirty-two weeks' duration in a college or scientific
 725 school approved by said board with the consent of the Commissioner
 726 of Public Health, which course included the study of chemistry and
 727 physics or biology; and if a graduate of an approved college of
 728 podiatry or podiatric medicine subsequent to July 1, 1971, that he or
 729 she has completed a course of study of two such prepodiatry college
 730 years, including the study of chemistry, physics or mathematics and
 731 biology, and that he or she received the degree of D.P.M., Doctor of
 732 Podiatric Medicine. No provision of this section shall be construed to
 733 prevent graduates of a podiatric college, approved by the Board of
 734 Examiners in Podiatry with the consent of the Commissioner of Public
 735 Health, from receiving practical training in podiatry in a residency
 736 program in an accredited hospital facility which program is accredited
 737 by the Council on Podiatric Education.

738 Sec. 28. Subsection (a) of section 20-71 of the general statutes is
 739 repealed and the following is substituted in lieu thereof (*Effective*
 740 *October 1, 2007*):

741 (a) The Department of Public Health may issue a license to practice
 742 physical therapy without examination, on payment of a fee of two
 743 hundred twenty-five dollars, to an applicant who is a physical
 744 therapist registered or licensed under the laws of any other state or
 745 territory of the United States, any province of Canada or any other
 746 country, if the requirements for registration or licensure of physical
 747 therapists in such state, territory, province or country [were, at the
 748 time of application, similar to] are deemed by the department to be
 749 equivalent to, or higher than [the requirements in force in this state]
 750 those prescribed in this chapter.

751 Sec. 29. Subsection (b) of section 20-71 of the general statutes is
 752 repealed and the following is substituted in lieu thereof (*Effective*

753 October 1, 2007):

754 (b) The department may issue a physical therapist assistant license
755 without examination, on payment of a fee of one hundred fifty dollars,
756 to an applicant who is a physical therapist assistant registered or
757 licensed under the laws of any other state or territory of the United
758 States, any province of Canada or any other country, if the
759 requirements for registration or licensure of physical therapist
760 assistants in such state, territory, province or country [were, at the time
761 of application, similar to] are deemed by the department to be
762 equivalent to, or higher than [the requirements in force in this state]
763 those prescribed in this chapter.

764 Sec. 30. Subsection (b) of section 20-73d of the general statutes is
765 repealed and the following is substituted in lieu thereof (*Effective*
766 *October 1, 2007*):

767 (b) Each insurance company [which] that issues professional
768 liability insurance, as defined in subdivision (10) of subsection (b) of
769 section 38a-393, shall on and after January 1, 2007, render to the
770 Commissioner of Public Health a true record of the names and
771 addresses, according to classification, of cancellations of and refusals to
772 renew professional liability insurance policies and the reasons for such
773 [cancellation or refusal] cancellations or refusals to renew said policies
774 for the year ending on the thirty-first day of December next preceding.

775 Sec. 31. Subsection (b) of section 20-126d of the general statutes is
776 repealed and the following is substituted in lieu thereof (*Effective*
777 *October 1, 2007*):

778 (b) Each insurance company that issues professional liability
779 insurance, as defined in subdivision (4) of subsection (b) of section 38a-
780 393, shall on and after January 1, 2007, render to the Commissioner of
781 Public Health a true record of the names and addresses, according to
782 classification, of cancellations of and refusals to renew professional
783 liability insurance policies and the reasons for such [cancellation or

784 refusal] cancellations or refusals to renew said policies for the year
785 ending on the thirty-first day of December next preceding.

786 Sec. 32. Section 20-130 of the general statutes is repealed and the
787 following is substituted in lieu thereof (*Effective October 1, 2007*):

788 Each person, before beginning the practice of optometry in this
789 state, except as hereinafter provided, shall present to the Department
790 of Public Health satisfactory evidence that [he has a qualifying
791 academic certificate from the Commissioner of Education showing that
792 he has been graduated after a four years' course of study in a public
793 high school approved by the State Board of Education, or has a
794 preliminary education equivalent thereto, and] such person has been
795 graduated from a school of optometry approved by the board of
796 examiners with the consent of the Commissioner of Public Health,
797 [and maintaining a course of study of not less than four years.] The
798 board shall consult, where possible, with nationally recognized
799 accrediting agencies when approving schools of optometry. [No school
800 of optometry shall be approved unless it has a minimum requirement
801 of a course of study of one thousand attendance hours. No school shall
802 be disapproved by the board solely because it is located in a country
803 other than the United States or its territories or possessions. The
804 qualifications of any applicant who has not been graduated from an
805 approved public high school shall be determined by the State Board of
806 Education by adequate preliminary examination, the fee for which
807 shall be twenty-five dollars.] All applicants shall be required to [take]
808 successfully complete an examination [conducted] prescribed by the
809 Department of Public Health [under the supervision] with the consent
810 of the board of examiners, in theoretic, practical and physiological
811 optics, theoretic and practical optometry, ocular pharmacology and the
812 anatomy and physiology of the eye; and said department shall
813 determine the qualifications of the applicant and, if they are found
814 satisfactory, shall give a license to that effect. Passing scores shall be
815 established by the department with the consent of the board. The
816 department may, upon receipt of four hundred fifty dollars, [accept

817 and approve, in lieu of the examination required in this section, a
 818 diploma of the National Board of Examiners in Optometry, subject to
 819 the same conditions as hereinafter set forth for acceptance, in lieu of
 820 examination, of a license from a board of examiners in optometry of
 821 any state or territory of the United States or the District of Columbia
 822 and may issue to such person a statement certifying to the fact that
 823 such person has been found qualified to practice optometry. Any]
 824 issue a license to any person who is a currently practicing competent
 825 practitioner who [presents to the Department of Public Health a
 826 certified copy or certificate of registration or license, which was] holds
 827 a license issued to [him] such person after examination by a board of
 828 registration in optometry in any other state or territory of the United
 829 States in which the requirements for registration are deemed by the
 830 department to be equivalent to, or higher than, those prescribed in this
 831 chapter. [, may be given a license without examination, provided such
 832 state shall accord a like privilege to holders of licenses issued by this
 833 state. The fee for such license shall be four hundred fifty dollars. The
 834 times and places of examination of applicants shall be determined by
 835 the department. Each applicant shall pay to the department the sum of
 836 fifty dollars before examination. No person otherwise qualified under
 837 the provisions of this section shall be denied the right to apply for or
 838 receive an optometrist's license solely because he is not a citizen of the
 839 United States.] No license shall be issued [without examination] under
 840 this section to any applicant against whom professional disciplinary
 841 action is pending or who is the subject of an unresolved complaint.
 842 [The department shall inform the board annually of the number of
 843 applications it receives for licensure without examination under this
 844 section.]

845 Sec. 33. Subsection (b) of section 20-162r of the general statutes is
 846 repealed and the following is substituted in lieu thereof (*Effective*
 847 *October 1, 2007*):

848 (b) Except as otherwise provided in this section, for registration
 849 periods beginning on and after October 1, 2007, a licensee applying for

850 license renewal shall [either maintain credentialing as a respiratory
851 therapist, issued by the National Board for Respiratory Care, or its
852 successor organization, or] earn a minimum of six hours of continuing
853 education within the preceding registration period. Such continuing
854 education shall (1) be directly related to respiratory therapy; and (2)
855 reflect the professional needs of the licensee in order to meet the health
856 care needs of the public. Qualifying continuing education activities
857 include, but are not limited to, courses, including on-line courses,
858 offered or approved by the American Association for Respiratory Care,
859 regionally accredited institutions of higher education, or a state or local
860 health department.

861 Sec. 34. Subsection (g) of section 20-222 of the general statutes is
862 repealed and the following is substituted in lieu thereof (*Effective*
863 *October 1, 2007*):

864 (g) Any person, firm, partnership or corporation engaged in the
865 funeral service business shall maintain at the address of record of the
866 funeral service business identified on the certificate of inspection:

867 (1) All records relating to contracts for funeral services, prepaid
868 funeral contracts or escrow accounts shall, [be maintained at the
869 address of record of the funeral home identified on the certificate of
870 inspection] for a period of not less than three years after the death of
871 the individual for whom funeral services were provided;

872 (2) Copies of all death certificates, burial permits, authorizations for
873 cremation, documentation of receipt of cremated remains and written
874 agreements used in making arrangements for final disposition of dead
875 human bodies, including, but not limited to, copies of the final bill and
876 other written evidence of agreement or obligation furnished to
877 consumers, for a period of not less than three years after such final
878 disposition; and

879 (3) Copies of price lists, for a period of not less than three years from
880 the last date such lists were distributed to consumers.

881 Sec. 35. Section 20-363 of the general statutes is repealed and the
882 following is substituted in lieu thereof (*Effective October 1, 2007*):

883 The commissioner may refuse to issue or renew or may suspend or
884 revoke a license or take any of the actions set forth in section 19a-17
885 upon proof that the applicant or license holder (1) has employed or
886 knowingly cooperated in fraud or material deception in order to obtain
887 [his] a license or has engaged in fraud or material deception in the
888 course of professional services or activities at any place; (2) has been
889 guilty of illegal, incompetent or negligent conduct in his or her
890 practice; [or] (3) has violated any provision of this chapter or any
891 regulation adopted [hereunder] under this chapter; (4) has been found
892 guilty or convicted as a result of an act which constitutes a felony
893 under (A) the laws of this state, (B) federal law, or (C) the laws of
894 another jurisdiction and which, if committed within this state, would
895 have constituted a felony under the laws of this state; or (5) has been
896 subject to disciplinary action similar to that specified in section 19a-17
897 by a duly authorized professional disciplinary agency of any state, the
898 District of Columbia, a United States possession or territory, or a
899 foreign jurisdiction. The commissioner may petition the superior court
900 for the judicial district of Hartford to enforce any action taken
901 pursuant to section 19a-17. Before the commissioner may suspend,
902 revoke or refuse to renew a license or take such other action, [he] the
903 commissioner shall give the applicant or license holder notice and
904 opportunity for hearing as provided in the regulations adopted by the
905 commissioner.

906 Sec. 36. Sections 19a-116a, 19a-121a, 19a-121d, 19a-121e and 19a-
907 127k of the general statutes are repealed. (*Effective October 1, 2007*)

| | | |
|---|------------------------|------------|
| This act shall take effect as follows and shall amend the following sections: | | |
| Section 1 | <i>October 1, 2007</i> | 1-43 |
| Sec. 2 | <i>October 1, 2007</i> | 1-55 |
| Sec. 3 | <i>October 1, 2007</i> | 17a-238(g) |

| | | |
|---------|------------------------|------------------|
| Sec. 4 | <i>October 1, 2007</i> | 19a-7d(a) |
| Sec. 5 | <i>October 1, 2007</i> | 19a-17(a) |
| Sec. 6 | <i>October 1, 2007</i> | 19a-26 |
| Sec. 7 | <i>October 1, 2007</i> | 19a-121 |
| Sec. 8 | <i>October 1, 2007</i> | 19a-121b |
| Sec. 9 | <i>October 1, 2007</i> | 19a-121c |
| Sec. 10 | <i>October 1, 2007</i> | 19a-121f |
| Sec. 11 | <i>October 1, 2007</i> | 19a-180(i) |
| Sec. 12 | <i>October 1, 2007</i> | 19a-322 |
| Sec. 13 | <i>October 1, 2007</i> | 19a-490(a) |
| Sec. 14 | <i>October 1, 2007</i> | 19a-490(l) |
| Sec. 15 | <i>October 1, 2007</i> | 19a-561(c)(3) |
| Sec. 16 | <i>October 1, 2007</i> | 19a-562(a) |
| Sec. 17 | <i>October 1, 2007</i> | 19a-562(c) |
| Sec. 18 | <i>October 1, 2007</i> | 19a-562a |
| Sec. 19 | <i>October 1, 2007</i> | 19a-570 |
| Sec. 20 | <i>October 1, 2007</i> | 19a-575a |
| Sec. 21 | <i>October 1, 2007</i> | 19a-577 |
| Sec. 22 | <i>October 1, 2007</i> | 19a-580f |
| Sec. 23 | <i>October 1, 2007</i> | 20-8a(c) |
| Sec. 24 | <i>from passage</i> | 20-12a(7) |
| Sec. 25 | <i>from passage</i> | 20-74s(a)(7) |
| Sec. 26 | <i>from passage</i> | 20-74s(t) |
| Sec. 27 | <i>October 1, 2007</i> | 20-54(a) |
| Sec. 28 | <i>October 1, 2007</i> | 20-71(a) |
| Sec. 29 | <i>October 1, 2007</i> | 20-71(b) |
| Sec. 30 | <i>October 1, 2007</i> | 20-73d(b) |
| Sec. 31 | <i>October 1, 2007</i> | 20-126d(b) |
| Sec. 32 | <i>October 1, 2007</i> | 20-130 |
| Sec. 33 | <i>October 1, 2007</i> | 20-162r(b) |
| Sec. 34 | <i>October 1, 2007</i> | 20-222(g) |
| Sec. 35 | <i>October 1, 2007</i> | 20-363 |
| Sec. 36 | <i>October 1, 2007</i> | Repealer section |

Statement of Purpose:

To make technical and other revisions to laws governing the Department of Public Health.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]